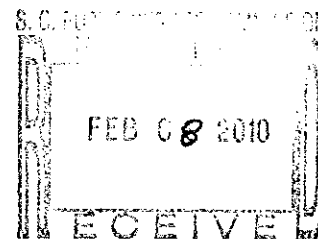


223160

BEFORE  
THE PUBLIC SERVICE COMMISSION  
OF SOUTH CAROLINA



DOCKET NO. 2009-512-W

IN RE: )  
Application of Hamilton-Haynes Water Works )  
for Approval of New Schedule of Rates and )  
Charges for Water Service Provided to its )  
Customers in Moncks Corner, SC 29461 )

Hamilton-Haynes Water hereby applies to the South Carolina Public Service Commission for Certificate of Public Convenience of Necessity and approval of rates and charges pursuant to South Carolina Public Service Commission's rules and regulations and S.C. Code Ann. S58-5-240 (Law. Co-op. Supp. 1995). In support of its application, Hamilton-Haynes provides the following information:

1. Hamilton-Haynes (Charles Hamilton and Haynes Property Management, LLC, Carolyn Haynes Smith Manager), is the owner and operator of the distribution system supplying and providing water to customers in Moncks Corner, South Carolina.
2. Because Hamilton-Haynes Water Works has experienced expenses in the operation of its water system we respectfully applies for the approval schedule rates and charges in all areas served.
3. All communication or inquires regarding this application should be directed to...

Carolyn Haynes Smith  
255 North Highway 52 Suite 1  
Moncks Corner, SC 29461  
843-761-4959  
843-761-1472 Fax  
and/or

Charles A. Hamilton  
255 North Highway 52 Suite 1  
Moncks Corner, SC 29461  
843-761-4959  
843-761-1472 Fax

# HAMILTON-HAYNES WATER WORKS

## Income Statement

For the Year Ending on: December 31, 2009

	CURRENT YEAR	NEW PROPOSED RATES
<b>Revenue</b>		
Water	\$24,571	\$27,840
New Taps (3)	\$1,500	0.00
New Meters (4)	\$240	0.00
Late Charges	1944	0.00
<b>Total Revenue</b>	<b>\$28,255</b>	<b>\$27,840</b>
<b>Gross Profit (Loss)</b>	<b>\$28,255</b>	<b>\$27,840</b>
<b>General Expenses</b>		
Salaries & wages	\$ 9,998	\$9,998
Electricity	5,161	5,161
Repair and maintenance	1,757	1,757
Lab Fees	535	535
Rent	2,040	2,040
Office expense	35	500
Postage	45	300
Insurance	955	1,455
Accounting and Bookkeeping	175	200
Utility Regulation expense	-	183
Rate Case expense	-	1,000
Property Taxes	800	800
Miscellaneous	150	150
Income Tax expense	875	481
<b>Total General Expenses</b>	<b>\$22,526</b>	<b>\$24,560</b>
<b>Net Income (Loss)</b>	<b>\$5,729</b>	<b>\$3,280</b>

## Number 3

### HAMILTON-HAYNES WATER WORKS

#### PROPOSED SCHEDULE OF RATES AND CHARGES

##### 1. Monthly Charges

###### Residential and Commercial

We are requesting an approval of a flat rate of \$25.00 per month for all single family residents, a \$40.00 flat rate for commercial taps, and a \$40.00 fee for the church.

##### 2. Nonrecurring Charges

We are requesting an approval of ...

New connections Tap in Fee	
¾" Meter	\$ 560.00
1" Meter	\$ 760.00
1 ½" Meter	\$1,260.00

New service with existing water Tap	
¾" Meter	\$ 60.00

##### 3. Late Payment Charge

We are requesting an approval late-payment charge of 1 ½ % or any other amount approved by the commission for payments received after the 25<sup>th</sup> of the month. Service may be terminated for non-payment of a bill.

##### 4. Charges for Discontinuance and Reconnection

We are requesting an approval for reconnection fees of forty dollars (\$40.00) during normal working hours (8:00 AM to 4:00 Monday – Friday) PM and fifty dollars (\$50.00) after hours and weekends when service has been discontinued because of non-payment to be paid prior to the utility reconnecting service.

##### 5. NSF Charge

We are requesting an approval of NSF check charge up to the maximum amount allowed by applicable South Carolina Public Service Commission rule.

# HAMILTON-HAYNES WATER WORKS

## Balance Sheet Projection

December 31, 2009

		CURRENT YEAR
ASSETS		
<b>Current Assets</b>		
Cash		\$13,023
Accounts receivable	37,431	
Less: Reserve for bad debts	0	37,431
Inventories		0
Prepaid expenses		0
Other:		
<b>Total Current Assets</b>		<b>\$50,455</b>
<b>Fixed Assets</b>		
Equipments	38,500	
Less: Accumulated depreciation	-38,500	0
Buildings	22,000	
Less: Accumulated depreciation	-22,000	0
Land		0
<b>Total Fixed Assets</b>		<b>\$0</b>
<b>TOTAL ASSETS</b>		<b>\$50,455</b>
LIABILITIES AND EQUITY		
<b>Current Liabilities</b>		
Accounts payable		\$0
Payroll taxes payable		0
Unearned revenues		0
Short-term notes payable (due within 12 months)		0
<b>Total Current Liabilities</b>		<b>\$0</b>
<b>Stockholders' Equity</b>		
Partner's Contributions		\$10,000
Partner's Draws		23,318
Accumulated retained earnings		9,403
Current net profit (loss)		7,734
<b>Total Capital</b>		<b>\$50,455</b>
<b>TOTAL LIABILITIES AND STOCKHOLDERS' EQUITY</b>		<b>\$50,455</b>

## NUMBER 7

### Depreciation of Equipment & Assets

Assets	Date Acquired	Cost & Repairs	Prior Depreciation	Current Depreciation	Depreciation Balance
Pump House	June 1960	\$11,000.00	\$11,000.00	\$0.00	\$0.00
Pump House	June 1960	\$11,000.00	\$11,000.00	\$0.00	\$0.00
Storage Tank	August 2000	\$7,000.00	\$7,000.00	\$0.00	\$0.00
Storage Tank	April, 1998	\$6,500.00	\$6,500.00	\$0.00	\$0.00
Mains	Various	\$13,000.00	\$13,000.00	\$0.00	\$0.00
Pump	May 2002	\$800.00	\$800.00	\$0.00	\$0.00
Pump	July 2004	\$900.00	\$900.00	\$0.00	\$0.00
Well	June 1960	\$3,500.00	\$3,500.00	\$0.00	\$0.00
Well	June 1960	\$3,500.00	\$3,500.00	\$0.00	\$0.00

Equipment	Date Acquired	Cost	Prior Depreciation	Current Depreciation	Depreciation Balance
Generator	September 1995	\$1,200.00	\$1,200.00	\$0.00	\$0.00
Generator	October 2000	\$1,500.00	\$1,500.00	\$0.00	\$0.00
Air Compressor	June 2004	\$600.00	\$600.00	\$0.00	\$0.00

**Note:**

All assets and equipments have been fully depreciated.

## NUMBER 8

Hamilton-Haynes Water Works is currently serving ninety-one (91) customers. Of those ninety-one customers two are commercial and one is a church. The area that Hamilton-Haynes provides water to is an exiting residential community with very little new homes being added in the community. Existing home are changing owners, which will allow for a new customer but, not a new tap.

Within the next twelve months we are not expecting any additional taps.

Currently there are no irrigations systems connected to the water supply. In the future if an irrigation system is requested Hamilton-Haynes is requesting a rate approval of \$600.00 for the installation of a meter for the irrigations system and a flat monthly fee of \$12.00 for the irrigation system. If any lawn irrigations are requested they will be considered as low hazard and will require the installation of an approved back-flow prevention device consistent with DHEC regulations and requirements. The expenses for the installation, maintenance, and verification of operation of any back-flow prevention devices will be paid by the customer.

NUMBER 10

Hamilton-Haynes Water Works has made application for a performance bond. The bond will be submitted to the South Carolina Public Service Commission within thirty (30) days of receiving an order that my certification has been granted.





## DISCRIPTION OF OPERATING AREA

Hamilton-Haynes Water Works serves a small community in Moncks Corner, SC 29461 known as West End. The West End community is located between West Main Street (Highway 6), Haynesville Road Extension, and Whitesville Road.

## Number 12

### STATEMENT OF TOTAL PLANT INVESTMENT

Hamilton-Haynes Works plant consists of two wells, two pump houses, and two water storage tanks. The wells, storage tanks and pump houses are maintain according to DHEC requirements. The pump house, storage tanks and mains have a total investment of approximately Forty Eight Thousand dollars (\$48,000.00).

BOARD:  
Paul C. Aughtry, III  
Chairman  
Edwin H. Cooper, III  
Vice Chairman  
Steven G. Kisner  
Secretary



C. Earl Hunter, Commissioner

*Promoting and protecting the health of the public and the environment*

BOARD:  
Henry C. Scott  
M. David Mitchell, MD  
Glenn A. McCall  
Coleman F. Buckhouse, MD

January 22, 2010

Ms. Carolyn Smith  
255 N. Highway 52  
Suite 1  
Moncks Corner, SC 29461

RE: Water System #0850014  
O Haynes System (Charles Hamilton)  
Public Service Commission Case

Dear Ms. Smith:

This letter confirms that the referenced facility has the proper DHEC drinking water operating permit.

I can be reached at 803-898-4157 or at debessjp@dhec.sc.gov.

Sincerely,

Jeffrey P. deBessonnet, P.E., Director  
Water Facilities Permitting Division

cc: Shawn Clark  
Harvey Wilkins, Charleston EQC Office

## **NUMBER 14**

**HAMILTON-HAYNES WATER WORKS**  
255 N Hwy 52 Suite 1  
Moncks Corner, SC 29461  
843-761-4959  
843-761-1472-Fax

Bill Issue Date  
December 24,2009

<b>Due Date</b> By the 1st of Each Month
---

**BILLING FOR:**

John Doe  
123 AnyWhere Street  
Moncks Corner, SC 29461

<b>Amount Due per Month</b> <b>\$25.00</b>
---

<b>Late Payment Date</b> 25th of the Month
---

### **Charges Per Month** **January - December**

**Water Charges ---- Flat Rate of \$25.00 Per Month**

Make check or money order payable to : **Hamilton-Haynes Water Works**

The rate schedule is available at the office and is available upon request

<b>To report service problems after regular business hours call 843-514-9327</b>
--

## **ENGINEERING PLANS AND SPECIFICATIONS WAIVER**

Hamilton-Haynes Water Works began construction of the water system in the 1960's and over the years, additional service lines were installed to meet the growing demand for water services.

In view of the current operating permit issued to Hamilton-Haynes Water Works by DHEC, Hamilton-Haynes Water Works hereby respectfully request that the Public Service Commission of South Carolina grant a waiver for the requirement of Engineering Plans and Specifications as required by the Code Regulations Section R.103-712.4 (B)(3).

## **CONSTRUCTION WAIVER**

The Construction of Hamilton-Haynes System is essentially complete and has been in operation, in whole or part, since the 1960's.

In view of the current operating permit issued to Hamilton-Haynes Water Works by DHEC, Hamilton-Haynes Water Works hereby respectfully request that the Public Service Commission of South Carolina grant a waiver for the requirement of Engineering Plans and Specifications as required by Code of Regulations Sections R.103-712.4(B)(4).

## **HAMILTON – HAYNES WATER WORKS**

**255 North Highway 52 Suite # 1**

**Moncks Corner, SC 29461**

**(843) 761-4959**

**843-761-1472 Fax**

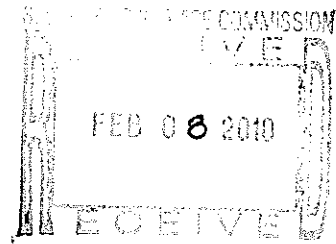
### **SERVICE INFORMATION**

1. Monthly Water fee will be **\$25.00 for single family residents, \$40.00 for commercial, and \$40.00 for the church.**
2. Before service can be provided, an installation fee of \$60.00 must be paid.
3. Monthly fees are due on the **first of each month** and prompt payment in full is required. **Payment received after the 25<sup>th</sup> of the month will carry a 1 ½% late charge** or any other amount approved by the commission. Service may be terminated for non-payment of a bill.
4. When service has been discontinued because of non-payment, the following reconnect fees will apply: \$40.00 during normal working hours (8:00 AM to 4:00 PM) on Mondays, Tuesdays, Thursdays, and Fridays and \$50.00 after hours and weekends.
5. All amounts owed must be **paid in full** by cash, cashier check, or money order, before service can be reconnected. **No personal checks** will be accepted for reconnection.
7. IMPORTANT: If you have any questions, or concerns, please call **843 761-4959.**



C. Earl Hunter, Commissioner

*Promoting and protecting the health of the public and the environment*



August 5, 2009

Charles Hamilton  
255 N Hwy 52  
Moncks Corner, SC 29461

RE: **Water System Sanitary Survey**  
O Haynes System WS # 0850014  
Berkeley County

Dear Mr. Hamilton,

A sanitary survey of the above referenced potable water system was conducted on August 4, 2009. A sanitary survey is an evaluation of the components of a water system and record keeping requirements.

Attached for your reference is a copy of the form used while conducting the sanitary survey. Any deficiencies are noted by "I" for needs improvement or "U" for unsatisfactory.

### System Description

O Haynes System is served potable water by two wells. Each well may be isolated for maintenance and the other can temporarily serve the entire population.

**Well One, West End Rd.:** Is a 4-inch diameter, 240-foot deep well with a 3.00 hp submersible pump. A 5,000-gallon pressure tank is located to the left of the well house. A small hydropneumatic tank is located inside the well house and is intentionally waterlogged to serve as sand removal.

**Well Two, West End Dr.:** Is a 4-inch diameter, 246-foot deep well with a 3.00 hp submersible pump. One 3,100-gallon pressure tank is located to the right of the well. This well is located behind the duplex. A small hydropneumatic tank is located inside the well house, which contains the pressure tank, and is intentionally waterlogged to serve as sand removal.

### Survey Results

The following were either noted as deficiencies or are provided for information:

Item # 2      Protection from Contamination      "S"

The crack in the concrete pad of **Well One** has been filled in.



**Item # 16      Cross Connection Control      "S"**

Residential dual check valves are located at each residential and non-residential connection. A written policy regarding low hazard lawn irrigation systems has been included in the procedures manual.

**Item # 17      Valve Maintenance      "S"**

All 8 valves are exercised on a quarterly basis. Records are being maintained and a written program is in place.

**Item # 18      Flushing Program      "S"**

There are two sites on opposite ends of the system that are flushed on a quarterly basis. Records are being maintained and a written program is in place.

**Item # 21      Sample Siting Plan      "S"**

Two bacteriological samples are rotated every other month. One sample is collected by Trident Labs every other month. Sample sites are listed on the system map.

**Item # 27      Storage Maintenance      "S"**

The 5,000-gallon storage tank has been sanded and painted.

**Item # 28      Certified Operator      "S"**

Daniel J. Hare is the Level D SCLLR licensed operator for this water system. However, his distribution operator license was not available for review. Please add this to the procedures manual.

**Special Note**

The South Carolina State Primary Drinking Water Regulations 61-58 requires: *"Copies of any written reports, summaries or communications relating to sanitary surveys or operational inspections of the public water supply conducted by the supplier of water, by a private consultant, or by any local, state, or federal agency, shall be kept for a period of not less than ten (10) years after completion of the sanitary survey involved."* Records for all water quality monitoring must be kept for a minimum of three (3) years.

Page 3 of 3  
Letter to Mr. Hamilton  
August 5, 2009

During this survey, it was mentioned to the Department that O Haynes System might be turned over to BCWSA in the future, although no definite plans have been made.

The Department has issued an overall rating of **Satisfactory** for this water system.

If you have any questions, or if I can be of further assistance, please contact me at 843-953-0178.

Sincerely,



Ashley E Valiquette  
Charleston EQC Office

CC: Marty Chaney, Bureau of Water  
Greg Sams, Charleston EQC Office  
Berkeley County Environmental Health  
File

## SCDHEC

## Public Water System Inventory Report Form

## Bureau of Water

Site Name: O HAYNES SYSTEM  
System Number: 0850014  
Fax Number: (843)761-1472

(A)dd, (M)odify, (R)enum, (D)etele: **M**Reason: Sanitary SurveyToday's Date: 8/4/09

## DW Mailing Address:

Owner: HAMILTON, CHARLES  
Attn:  
255 N HWY 52  
MONCK'S CORNER, SC 29461

Owner Business Telephone: (843)761-4959  
Owner Emergency Telephone: (843)514-9327

## Site Info Address:

255 N HWY 52  
STE 1  
MONCK'S CORNER, SC 29461

\*Contact: SMITH, CAROLYN

\*Phone: (843)514-9538

\*email: None

DW Mail Attention: CHARLES HAMILTON

DW Contact Telephone: NONE

## System Characteristics

System Type. . . . C	Inact Code. . . . .	Service Area. . . . R1	Season On (mo/day). . . . 01/01
	Inact Date (mo/yr). . .	Counties Served:	Season Off (mo/day). . . . 12/31
Owner Type. . . . NA	Begin Date (mo/yr). . . 03/1989	08	

## Statistical Information

## Source Use Information:

Percent Surface Water. . . . . 0  
Percent Ground Water. . . . . 100  
Percent Purchased Surface Water. . . 0  
Percent Purchased Ground Water. . . 0

Total must equal 100%

Number of Surface Water Sources. . . 0  
Number of Ground Water Sources. . . 2  
Purchased Surface Water Sources. . . 0  
Number of Permanent SW Sources. . . 0  
Number of Emergency SW Sources. . . 0  
Number of Permanent GW Sources. . . 2  
Number of Emergency GW Sources. . . 0

## Service Population:

Population. . . . . 183  
Secondary Population. . . . . 0

## Number of Service Connections:

Residential. . . . . 70  
Non Residential. . . . . 3  
Maximum Allowable. . . . 104  
Permitted. . . . . 104

Total ... 73

## Production (MGD):

Average. . . . . 0.0092  
Maximum Day. . . . . .0095

## Capacity:

Total. . . . . .0672  
Emergency. . . . . 0.0000

## Storage:

Elevated (MG). . . . . 0.000  
Ground (MG). . . . . 0.000  
Pressure (TG). . . . . 8.100

## Comments

\* Add/change contact name, address, phone and email info here. This information can be found in EFIS/Permits/Relations/type DW Contact.

Signature: Andy E. Vargall

## Bureau of Water

Site Name: O HAYNES SYSTEM

System Number: 0850014

Source ID: G08167

(A)dd, (M)odify, (R)enum, (D)elete: ☒

Reason:

Today's Date:

Sanitary Survey  
8/14/09

## General Information

Location ..... WEST END ROAD  
Source Name ..... WELL ONE  
Receiving Plant ..... NONE  
Plant ID ..... NONEAvailability Code ..... P  
Latitude ..... 33.19649270  
Longitude ..... - 80.02975960  
Source Code ..... G

## Ground Water Source Information

Well CharacteristicsDepth (ft) ..... 240  
Type ..... 4  
Casing Diameter (in) ..... 4  
Casing Type ..... S  
Under the Direct Influence of SW? .. NWell Pump CharacteristicsHorsepower ..... 3.00  
Type ..... S  
Design Yield (gpm) ..... 35.00  
Test Yield (gpm) ..... 0.00  
Avg. Daily Production (TGD) .. 0.00  
Regulated Capacity (TGD) ... 33.60

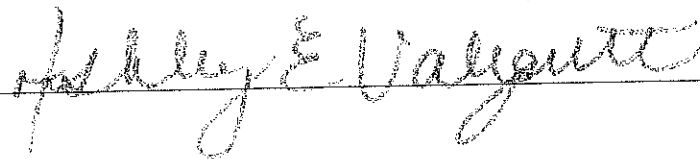
## Treatment Codes

N0000

## Comments

Seal around electrical conduit and well seal. Leak in storage tank. Some rust on the bottom. Filter removed, housing remains. Flow meter is in wrong location. Wellhead piping must be configured so that all water is pumped from well must go through meter. mec 11/16/05  
Space between conduit and well seal has been caulked.  
Flow meter in wrong location must be relocated if work is done to wellhead piping. See report.  
Filter housing must be straight piped if work is done to wellhead piping. See report. mec 12/19/06

Signature:



## Bureau of Water

Site Name: O HAYNES SYSTEM

System Number: 0850014

Source ID: G08168

(A)dd, (M)odify, (R)enum, (D)elete: ☒ W

Reason:

Today's Date:

Sanitary Survey  
8/4/09

## General Information

Location ..... WEST END DR,DUPLEX

Source Name ..... WELL TWO

Receiving Plant ..... NONE

Plant ID ..... NONE

Availability Code ..... P

Latitude ..... 33.19796370

Longitude ..... - 80.03799400

Source Code ..... G

## Ground Water Source Information

Well Characteristics

Depth (ft) ..... 246

Type ..... 4

Casing Diameter (in) ..... 4

Casing Type ..... S

Under the Direct Influence of SW? .. N

Well Pump Characteristics

Horsepower ..... 3.00

Type ..... S

Design Yield (gpm) ..... 35.00

Test Yield (gpm) ..... 0.00

Avg. Daily Production (TGD) .. 0.00

Regulated Capacity (TGD) ... 33.60

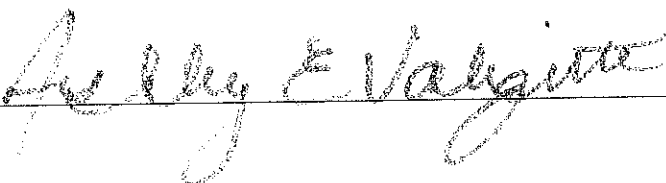
## Treatment Codes

N0000

## Comments

~~Flow meter is in wrong location. See note for well one regarding this item, mec 11/16/05~~~~Flow meter in wrong location; must be relocated if work is done to wellhead piping. See report.~~~~Threads must be cut off sample tap. mec 12/19/06~~

Signature:



Public Water System Sanitary Survey Report  
Ground Water Systems

Site name: O HAYNES SYSTEM

System number: 0850014

Last Survey: 02/13/2008

Survey Date: 8/4/09

## SOURCE:

1. Quantity. .... S  
 2. Protection from Contam. .... 15  
 3. Security. .... S  
 4. Wellhead Piping. .... S  
 5. Pumps. .... S  
 6. Flow Measuring Device. .... 15

## WATER TREATMENT:

7. Filtration\* .... 15  
 8. Equipment Maintenance\* .... N  
 9. Chemical Storage & Hand.\* .... N  
 10. Chemical Feed\* .... N  
 11. Chemical Injection Points\* .... N

## DISTRIBUTION:

12. Water Quality. .... S  
 13. Operation & Control. .... S  
 14. Adequate Pressure. .... S  
 15. Fire Flow. .... N  
 16. Cross Connection Control. .... 15  
 17. Valve/Hydrant Maintenance .... S  
 18. Flushing Program. .... S  
 19. Leak Detection and Repair. .... S  
 20. System Map. .... S  
 21. Sample Siting Plan. .... 15  
 22. Disinfectant Residual\* .... N

## STORAGE:

23. Capacity. .... S  
 24. Sanitary Protection. .... S  
 25. Security. .... S  
 26. Appurtenances. .... S  
 27. Maintenance. .... 15

## OPERATIONAL CONTROL:

28. Certified Operator/Staffing\* .... S  
 29. Testing Equipment\* .... N  
 30. Monitoring/Records. .... S

## GENERAL O &amp; M:

31. Plant Security\* .... S  
 32. Facility Maintenance. .... S  
 33. Supplies/Spare Parts Inv. .... S  
 34. Waste Disposal\* .... N  
 35. Procedures Manual. .... S

## EMERGENCY OPERATION:

36. Stand-by Power. .... 15  
 37. Emergency Plan. .... S  
 38. Drought Response Plan\*\* .... N

## CONSUMER CONFIDENCE REPORTS:

39. CCR (Y/N). .... 15

## A. System Group (I - V). ....

## B. Operator Grade

- A. ....  
 B. ....  
 C. ....  
 D. ....  
 T. ....

## C. Dist. Group (I - V). .... II

## D. Distribution Operator Grade

- A. ....  
 B. ....  
 C. ....  
 D. .... 1  
 T. ....  
 G. ....

## E. Field Tests

- Chlorine. ....  
 pH. ....  
 psi ....  
 Other. ....

## S. Samples Taken

- Bacteriological. ....  
 Inorganic. ....  
 Organic. ....  
 Radiological. ....  
 Other. ....

## F. Type Inspection/Visit. .... GW ROUTINE

- G. Are all services metered? .... Y  
 Percent metered. .... 100

- H. Is system presently under order? .... N  
 If Yes, is system complying w/order? .... N

- I. Follow up scheduled? .... N  
 Date scheduled. ....

- J. Overall Rating. .... S

- K. Operator/Owner present? .... Y

\*Applicable for treated systems only.

\*\*Applicable for part 1 and 2 systems only.

This form represents neither a final approval of the water system, nor an approval to operate the system.



C. Earl Hunter, Commissioner

*Promoting and protecting the health of the public and the environment*

August 5, 2009

Charles Hamilton  
255 N Hwy 52  
Moncks Corner, SC 29461

RE: **Water System Sanitary Survey**  
O Haynes System WS # 0850014  
Berkeley County

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Daniel J. Hare is the Level D SCLLR licensed operator for this water system. However, his distribution operator license was not available for review. Please add this to the procedures manual.

**Special Note**

The South Carolina State Primary Drinking Water Regulations 61-58 requires: *"Copies of any written reports, summaries or communications relating to sanitary surveys or operational inspections of the public water supply conducted by the supplier of water, by a private consultant, or by any local, state, or federal agency, shall be kept for a period of not less than ten (10) years after completion of the sanitary survey involved."* Records for all water quality monitoring must be kept for a minimum of three (3) years.



Page 3 of 3  
Letter to Mr. Hamilton  
August 5, 2009

During this survey, it was mentioned to the Department that O Haynes System might be turned over to BCWSA in the future, although no definite plans have been made.

The Department has issued an overall rating of **Satisfactory** for this water system.

If you have any questions, or if I can be of further assistance, please contact me at 843-953-0178.

Sincerely,



Ashley E Valquette  
Charleston EQC Office

CC: Marty Chaney, Bureau of Water  
Greg Sams, Charleston EQC Office  
Berkeley County Environmental Health  
File

## SCDHEC

## Public Water System Inventory Report Form

## Bureau of Water

Site Name: O HAYNES SYSTEM

System Number: 0850014

Fax Number: (843)761-1472

(A)dd, (M)odify, (R)enum, (D)elete: M

Reason:

Sanitary Survey

Today's Date:

8/4/09

## DW Mailing Address:

Owner: HAMILTON, CHARLES

Attn:

255 N HWY 52

MONCK'S CORNER, SC 29461

Owner Business Telephone: (843)761-4959

Owner Emergency Telephone: (843)514-9327

## Site Info Address:

255 N HWY 52

STE 1

MONCK'S CORNER, SC 29461

\*Contact: SMITH, CAROLYN

\*Phone: (843)514-9538

\*email: None

DW Mail Attention: CHARLES HAMILTON

DW Contact Telephone: NONE

## System Characteristics

System Type: . . . C

Inact Code: . . . . .

Service Area: . . . R1

Season On (mo/day). . . . . 01/01

Inact Date (mo/yr). . . .

Counties Served:

Season Off (mo/day). . . . . 12/31

Owner Type: . . . . NA

Begin Date (mo/yr). . . 03/1989

08

## Statistical Information

## Source Use Information:

Percent Surface Water. . . . . 0

Percent Ground Water. . . . . 100

Percent Purchased Surface Water. . . . . 0

Percent Purchased Ground Water. . . . . 0

Total must equal 100%

Number of Surface Water Sources. . . . . 0

Number of Ground Water Sources. . . . . 2

Purchased Surface Water Sources. . . . . 0

Number of Permanent SW Sources. . . . . 0

Number of Emergency SW Sources. . . . . 0

Number of Permanent GW Sources. . . . . 2

Number of Emergency GW Sources. . . . . 0

## Service Population:

Population. . . . . 183

Secondary Population. . . . . 0

## Number of Service Connections:

Residential. . . . . 70

Non Residential. . . . . 3

Maximum Allowable. . . . . 104

Permitted. . . . . 104

Total ... 73

## Production (MGD):

Average. . . . . 0.0092

Maximum Day. . . . . .0095

## Capacity:

Total. . . . . .0672

Emergency. . . . . 0.0000

## Storage:

Elevated (MG). . . . . 0.000

Ground (MG). . . . . 0.000

Pressure (TG). . . . . 8.100

## Comments

\* Add/change contact name, address, phone and email info here. This information can be found in EFIS/Permits/Relations/type DW Contact.

Signature:

Julv 21. 2009

Page 1 of 1

dwinvent.rdf

## Bureau of Water

Site Name: O HAYNES SYSTEM

System Number: 0850014

Source ID: G08167

(A)dd, (M)odify, (R)enum, (D)elete: ☒ M

Reason:

Today's Date:

Sanitary Survey  
8/4/09

## General Information

Location . . . . . WEST END ROAD  
Source Name . . . . . WELL ONE  
Receiving Plant . . . . . NONE  
Plant ID . . . . . NONE

Availability Code . . . . . P  
Latitude . . . . . 33.19649270  
Longitude . . . . . -80.02975960  
Source Code . . . . . G

## Ground Water Source Information

Well Characteristics

Depth (ft) . . . . . 240  
Type . . . . . 4  
Casing Diameter (in) . . . . . 4  
Casing Type . . . . . S  
Under the Direct Influence of SW? . . . . . N

Well Pump Characteristics

Horsepower . . . . . 3.00  
Type . . . . . S  
Design Yield (gpm) . . . . . 35.00  
Test Yield (gpm) . . . . . 0.00  
Avg. Daily Production (TGD) . . . . . 0.00  
Regulated Capacity (TGD) . . . . . 33.60

## Treatment Codes

N0000

## Comments

Seal around electrical conduit and well seal. Leak in storage tank. Some rust on the bottom. Filter removed, housing remains. Flow meter is in wrong location. Wellhead piping must be configured so that all water is pumped from well must go through meter. mec 11/16/05  
Space between conduit and well seal has been caulked.  
Flow meter in wrong location must be relocated if work is done to wellhead piping. See report.  
Filter housing must be straight piped if work is done to wellhead piping. See report. mec 12/19/06

Signature:

## Bureau of Water

Site Name: O HAYNES SYSTEM

System Number: 0850014

Source ID: G08168

(A)dd, (M)odify, (R)enum, (D)elete: ☒ W

Reason:

Today's Date:

Sanitary Survey  
8/4/09

## General Information

Location ..... WEST END DR, DUPLEX  
Source Name ..... WELL TWO  
Receiving Plant .... NONE  
Plant ID ..... NONE

Availability Code ..... P  
Latitude ..... 33.19796370  
Longitude ..... -80.03799400  
Source Code ..... G

## Ground Water Source Information

Well Characteristics

Depth (ft) ..... 246  
Type ..... 4  
Casing Diameter (in) ..... 4  
Casing Type ..... S  
Under the Direct Influence of SW? .. N

Well Pump Characteristics

Horsepower ..... 3.00  
Type ..... S  
Design Yield (gpm) ..... 35.00  
Test Yield (gpm) ..... 0.00  
Avg. Daily Production (TGD) .. 0.00  
Regulated Capacity (TGD) ... 33.60

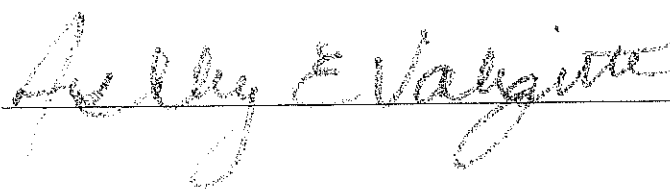
## Treatment Codes

N0000

## Comments

~~Flow meter is in wrong location. See note for well one regarding this item, mec 11/16/05~~  
~~Flow meter in wrong location, must be relocated if work is done to wellhead piping. See report.~~  
~~Threads must be cut off sample tap, mec 12/19/06~~

Signature:



Site name: O HAYNES SYSTEM

System number: 0850014

Last Survey: 02/13/2008

Survey Date: 8/9/09

## SOURCE:

1. Quantity. .... S  
 2. Protection from Contam. .... *LS*  
 3. Security. .... S  
 4. Wellhead Piping. .... S  
 5. Pumps. .... S  
 6. Flow Measuring Device. .... *LS*

## WATER TREATMENT:

7. Filtration\* .... *LS*  
 8. Equipment Maintenance\* .... N  
 9. Chemical Storage & Hand.\* .... N  
 10. Chemical Feed\* .... N  
 11. Chemical Injection Points\* .... N

## DISTRIBUTION:

12. Water Quality. .... S  
 13. Operation & Control. .... S  
 14. Adequate Pressure. .... S  
 15. Fire Flow. .... N  
 16. Cross Connection Control. .... *LS*  
 17. Valve/Hydrant Maintenance .... S  
 18. Flushing Program. .... S  
 19. Leak Detection and Repair. .... S  
 20. System Map. .... S  
 21. Sample Siting Plan. .... *LS*  
 22. Disinfectant Residual\* .... N

## STORAGE:

23. Capacity. .... S  
 24. Sanitary Protection. .... S  
 25. Security. .... S  
 26. Appurtenances. .... S  
 27. Maintenance. .... *LS*

## OPERATIONAL CONTROL:

28. Certified Operator/Staffing\* .... S  
 29. Testing Equipment\* .... N  
 30. Monitoring/Records. .... S

## GENERAL O &amp; M:

31. Plant Security\* .... S  
 32. Facility Maintenance. .... S  
 33. Supplies/Spare Parts Inv. .... S  
 34. Waste Disposal\* .... N  
 35. Procedures Manual. .... S

## EMERGENCY OPERATION:

36. Stand-by Power. .... *LS*  
 37. Emergency Plan. .... S  
 38. Drought Response Plan\*\* .... N

## CONSUMER CONFIDENCE REPORTS:

39. CCR (Y/N). .... *N LS*

## A. System Group (I - V). ....

## B. Operator Grade

- A. ....  
 B. ....  
 C. ....  
 D. ....  
 T. ....

## C. Dist. Group (I - V). .... II

## D. Distribution Operator Grade

- A. ....  
 B. ....  
 C. ....  
 D. .... 1  
 T. ....  
 G. ....

## E. Field Tests

- Chlorine. ....  
 pH. ....  
 psi ....  
 Other. ....

## S. Samples Taken

- Bacteriological. ....  
 Inorganic. ....  
 Organic. ....  
 Radiological. ....  
 Other. ....

## F. Type Inspection/Visit. .... GW ROUTINE

G. Are all services metered? .... Y  
Percent metered. .... 100H. Is system presently under order? .... N  
If Yes, is system complying w/order? .... NI. Follow up scheduled? .... N  
Date scheduled. ....

## J. Overall Rating. .... S

## K. Operator/Owner present? .... Y

\*Applicable for treated systems only.

\*\*Applicable for part 1 and 2 systems only.

This form represents neither a final approval of the water system, nor an approval to operate the system.